Findings from Waves 1-3 of the Rapid Cycle Polling Project

conducted for The SCAN Foundation

In conjunction with **The California Department** of Health Care Services

Field Research Corporation, San Francisco, California

Survey Objectives

To evaluate and track over time the transitioning of beneficiaries to coordinated care under Cal MediConnect (CMC).

- By assessing the confidence and satisfaction of CMC enrollees with the health services they are receiving.
- By comparing CMC enrollees' level of confidence and satisfaction with beneficiaries who chose to opt out of CMC or who live in non-CMC counties.
- By understanding the factors associated with eligible beneficiaries choosing to opt out of CMC.

About the Surveys (1)

Survey method

• Telephone interviews with stratified random samples of dual eligible beneficiaries in Cal MediConnect (CMC) counties, as well as beneficiaries in two non-CMC counties for control purposes.

Data collection periods

- Wave 3 Survey: February April 2016
- Wave 2 Survey: October November 2015
- Wave 1 Survey: June September 2015

Populations surveyed

- All Waves: CMC enrollees and opt-outs in 5 counties (Los Angeles, Riverside, San Bernardino, San Diego, and Santa Clara), and two non-CMC counties (San Francisco and Alameda)
- Wave 3 Survey was expanded to also include CMC enrollees and opt outs in two additional counties (San Mateo and Orange)

About the Surveys (2)

Sample Sizes by Survey Wave

- Wave 3: 3,301 interviews, including 1,704 CMC enrollees, 1,026 CMC optouts, and 571 beneficiaries in non-CMC counties.
- Wave 2: 2,500 interviews, including 1,370 CMC enrollees, 690 CMC optouts, and 440 beneficiaries in non-CMC counties.
- Wave 1: 2,502 interviews, including 1,394 CMC enrollees, 678 CMC optouts, and 430 beneficiaries in non-CMC counties.

Sample Sizes Waves 1 - 3 (aggregated)

- CMC Enrollees: 4,468 in total, including 1,497 in Los Angeles, 635 in Riverside, 648 in San Bernardino, 589 in San Diego, 663 in Santa Clara, 276 in San Mateo and 160 in Orange.
- CMC Opt-Outs: 2,394 in total, including 1,079 in Los Angeles, 318 in Riverside, 343 in San Bernardino, 312 in San Diego, 198 in Santa Clara, 73 in San Mateo and 71 in Orange.

Summary of the Findings

1. CMC enrollee confidence and satisfaction with their health services

Summary of the Findings

Similar to previous survey waves, large majorities of CMC enrollees in Wave 3 express confidence and satisfaction with the health services they are receiving. However, more CMC enrollees in Wave 3 than in prior waves report being confident and satisfied with their health services in a number of areas.

For example, compared to the Wave 2 survey, more CMC enrollees now report:

- Being confident that they know how to manage their health conditions (81% vs. 77%). (Table 1a)
- Knowing who to call if they have a health need or question (86% vs. 80%).
 (Table 1a)

1. CMC enrollee confidence and satisfaction with their health services (cont.)

Summary of the Findings

In addition, when examining trends across the three survey waves, there has been a small, but statistically significant increase in the proportions of CMC enrollees who say they are satisfied with their health care services on each of the six areas measured.

	% satisfied		
	<u>W1</u>	<u>W2</u>	<u>W3</u>
 the amount of time their doctor or other staff spends with them (Table 2a) 	83%	85%	87%
 the information their health plan gives them 			
explaining their benefits (Table 2a)	76%	73%	84%
their choice of doctors (Table 2a)	77%	78%	83%
their choice of hospitals (Table 2a)	76%	77%	81%
• the way different health providers work together (Table 2b)	77%	78 %	82%
how long they have to wait to see a doctor when			
they need an appointment (Table 2b)	73 %	76%	77%

2. CMC enrollee differences from beneficiaries in non-CMC counties

While the Wave 3 survey finds CMC enrollees' overall levels of confidence and satisfaction to be high and increasing in a number of areas, beneficiaries in non-CMC counties report higher levels of confidence and satisfaction than CMC enrollees in some areas. These include:

Summary of the Findings

- Are confident that they know how to manage their health conditions (81% among CMC enrollees vs. 87% in non-CMC counties). (Table 1a)
- Are confident that they can get questions about their health needs answered (81% vs. 87%). (Table 1a)
- Are satisfied with how long they have to wait to see a doctor when they need an appointment (77% vs. 82%). (Table 2b)

3. Differences between CMC enrollees and CMC opt-outs

The overall levels of confidence and satisfaction with the health services that enrollees in Cal MediConnect report in Wave 3 do not differ significantly from those reported by beneficiaries who opted out of Cal MediConnect. However, CMC enrollees differ from CMC opt-outs on various dimensions.

Summary of the Findings

- A larger proportion of CMC enrollees than opt-outs has been going to their personal doctor for less than one year (23% among enrollees vs. 13% among opt-outs) and a smaller proportion has been with their personal doctor for 10 or more years (14% vs. 20%). (Table 3)
- A smaller proportion of CMC enrollees than opt-outs is female (53% vs. 60%) or is age 75 or older (31% vs. 36%). (Table 8)
- A smaller proportion of CMC enrollees uses specialized equipment (47% vs. 53%) or requires assistance to perform common daily activities (40% vs. 46%). (Table 9)
- A smaller proportion of CMC enrollees has been an overnight patient in a hospital in the past 12 months (25% vs. 31%). (Table 9)

4. Which beneficiaries express lower levels of confidence about managing their health conditions and getting questions about their health needs answered

Summary of the Findings

The beneficiaries across all populations – CMC enrollees, opt-outs, and those living in non-CMC counties – who express lower levels of confidence in their ability to manage their health conditions and in getting questions about their health needs answered have the following characteristics:

- Are in poor health. (Table 1b)
- No more than an 8th grade education. (Table 1b)
- Require assistance for common daily activities. (Table 1b)

5. Beneficiaries who are less likely to be satisfied with many aspects of their health care services

Summary of the Findings

The characteristics of beneficiaries across all populations who express lower levels of satisfaction with their health care services in multiple areas include the following:

- Are in poor health. (Tables 2c and 2d)
- Have attended or graduated from college. (Tables 2c and 2d)
- Are under age 45. (Tables 2c and 2d)

6. Specific problems encountered by CMC enrollees with their health services

Summary of the Findings

No single issue is cited in the Wave 3 survey by more than one in five CMC enrollees as a problem they encountered since changing over to Cal MediConnect. The two most commonly reported problems were that a doctor they had been seeing was not available through their plan (20%) and that they had a misunderstanding about their health care services or coverages (18%). $(Table\ 4a)$

Slightly fewer CMC enrollees than opt-outs and beneficiaries in non-CMC counties report encountering two problems. These include: had a misunderstanding about their health services or coverages (Table 4a) and transportation problems kept them from getting needed health care. (Table 4b)

7. Beneficiaries' experiences with or perceptions of single care managers

Summary of the Findings

Slightly more than one in three of CMC enrollees (36%), opt-outs (35%) and beneficiaries in non-CMC counties (38%) report having a single care manager, such as a nurse or other helper from their health plan, who serves as their main point of contact and arranges all aspects of their care. (Table 5a)

About two-thirds of those with single care managers across each beneficiary segment reports have having such a manager has improved their care "a lot." (Table 5a)

Fewer than half of beneficiaries who do not currently have a single care manager across each segment think that having such a manager would improve their care "a lot." (Table 5b)

8. Beneficiaries' experiences with or perceptions of personal care plans

Summary of the Findings

About one in three beneficiaries also report having a personal care plan that is designed to take into account their health goals, needs and preferences. Slightly fewer CMC enrollees (33%) report having such a plan than do opt-outs (38%) or beneficiaries in non-CMC counties (40%). (Table 6a)

About two-thirds of beneficiaries with personal care plans across each subgroup reports than having such a plan has improved their care "a lot." (Table 6a)

About as many CMC enrollees without a personal care plan think that having such a plan would improve their care "a lot" as say it would improve their quality of care "a little" or "not at all." (Table 6b)

9. Reasons opt-outs are choosing not to participate in Cal MediConnect

Summary of the Findings

Opt-outs in the Wave 3 survey cite the following as reasons why they chose not to participate in Cal MediConnect:

- 88% Satisfied with my current health service/ didn't want to make a change
- 73% Didn't want to risk losing my doctor
- 63% Didn't want to risk losing any of my medicines
- 46% Didn't understand the information I received about the new program enough to make the change
- 45% Thought my benefits and services might be reduced
- 17% My doctor/other health provider recommended that I not participate

These percentages are similar to what was reported by CMC opt-outs in previous survey waves, although a slightly larger proportion of opt-outs in Wave 3 said that either they were satisfied with their current health care services/didn't want to make a change or they thought their benefits might be reduced as reasons for not participating in Cal MediConnect. (Table 7)

Table 1a

Confidence that beneficiaries know how to manage their health conditions, can get questions about their health needs answered, and know who to call

Overall Findings

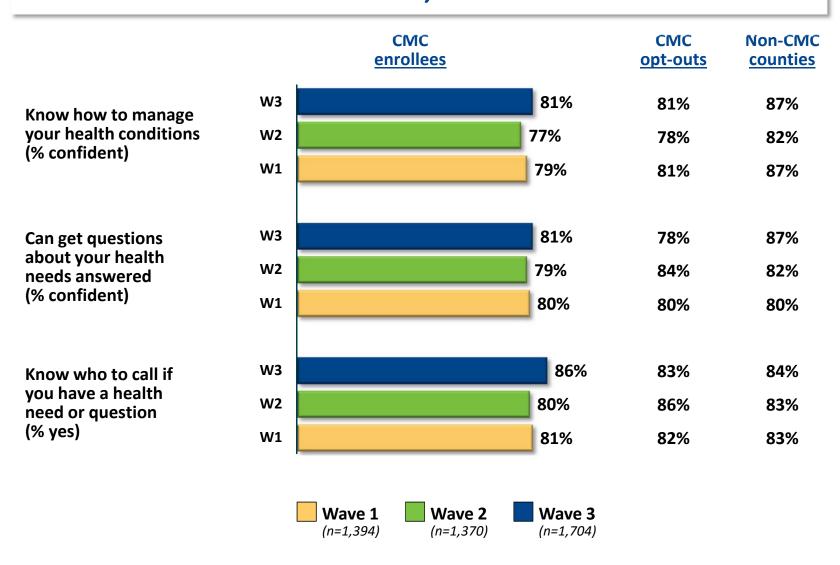


Table 1b

Subgroups of the beneficiary population who express lower levels of confidence about managing their health conditions and getting answers to questions about their health needs

	CMC <u>enrollees</u>	CMC opt-outs	Non-CMC counties
Know how to manage your health condition	<u>n</u>		
Are in poor health	-18	-17	-14
8 th grade education or less	-9	NS	-8
Require assistance for common daily activities	-7	-9	-11
Getting answers to questions about their h	<u>ealth needs</u>		
Are in poor health	-13	-14	-8
8 th grade education or less	-9	-6	NS
Require assistance for common daily activities	-5	-6	-7

^{*} Numbers shown represent the differences in percentage points in the proportions within each subgroup who express confidence that they can do this compared to all other beneficiaries. All percentage point differences are statistically significant at the 95% confidence level unless otherwise noted.

Table 2a

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (% satisfied)

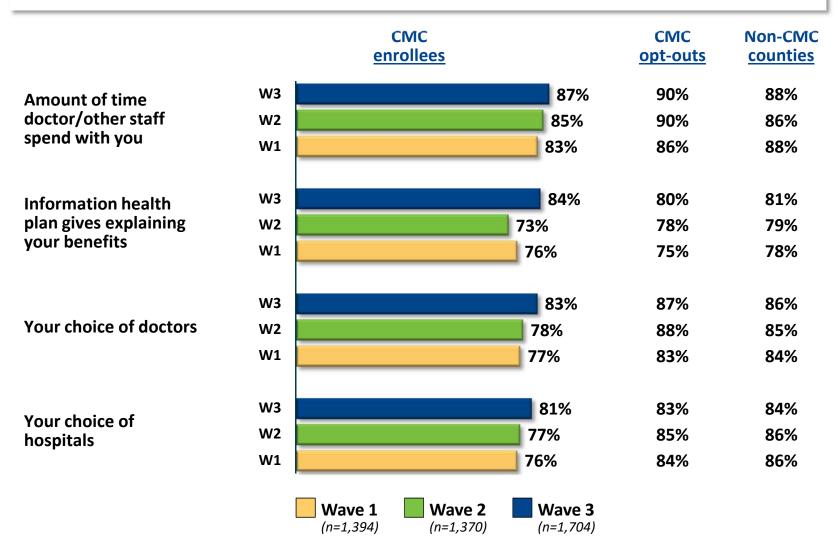
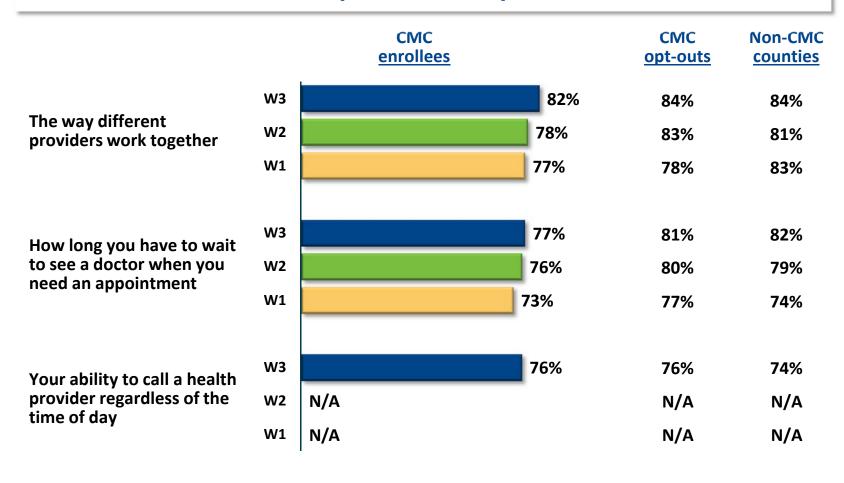


Table 2b

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (cont.) (% satisfied)



Wave 3

(n=1,704)

Table 2c

Subgroups of the beneficiary population who are less likely to be satisfied with multiple aspects of their health care services* (1)

	CMC <u>enrollees</u>	CMC opt-outs	Non-CMC counties
The choice of doctors you can see			
Are in poor health	-15	-11	-8
Attended college	-8	-5	NS
Under age 45	-7	-12	-15
The amount of time your doctor and other staff people spend with you			
Are in poor health	-13	-13	-11
Attended college	-6	-6	NS
Under age 45	-7	-5	-9

^{*} Numbers shown represent the differences in percentage points in the proportions within each subgroup who are satisfied with their health services in this area compared to all other beneficiaries. All percentage point differences are statistically significant at the 95% confidence level unless otherwise noted.

Table 2d

Subgroups of the beneficiary population who are less likely to be satisfied with multiple aspects of their health care services* (2)

	CMC <u>enrollees</u>	CMC opt-outs	Non-CMC counties
The way different health care providers wo together to give you the services you need	rk		
Are in poor health	-17	-12	-12
Attended college	-7	-9	NS
Under age 45	-7	-11	-13
The information that your health plan has given you explaining your benefits			
Are in poor health	-14	-15	-15
Attended college	-11	-12	-9
Under age 45	-9	NS	-13

^{*} Numbers shown represent the differences in percentage points in the proportions within each subgroup who are satisfied with their health services in this area compared to all other beneficiaries. All percentage point differences are statistically significant at the 95% confidence level unless otherwise noted.

Table 3

Length of time beneficiaries have been going to the doctor they consider their personal doctor

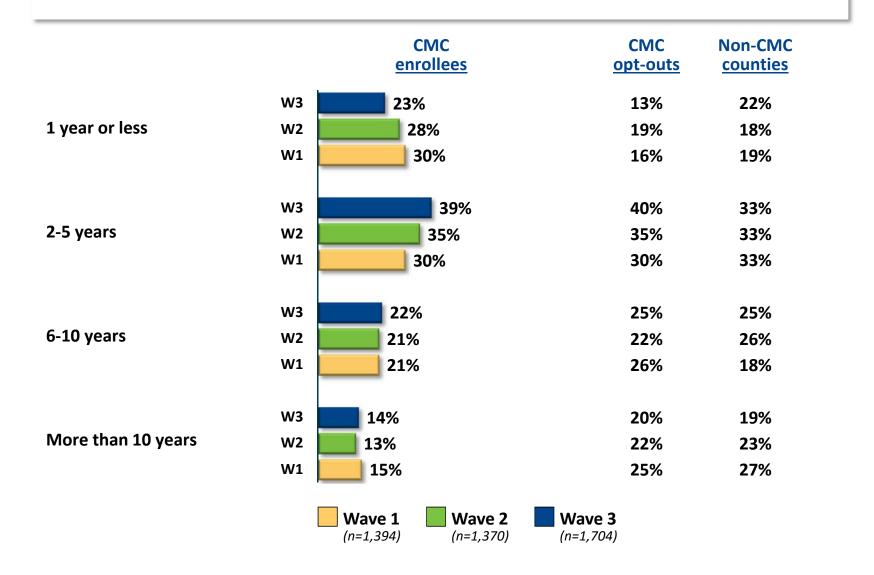


Table 4a

Specific problems encountered with health services in the past year

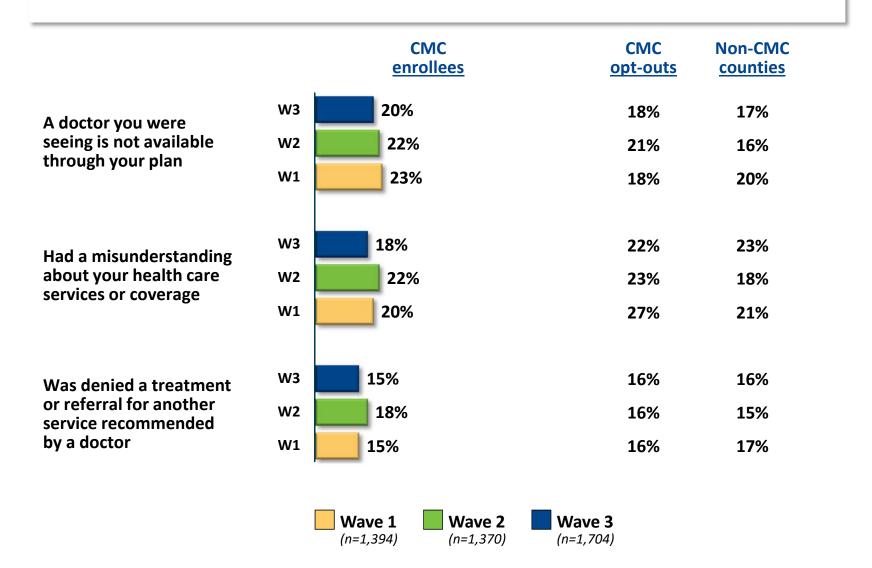


Table 4b

Specific problems encountered with health services in the past year (cont.)

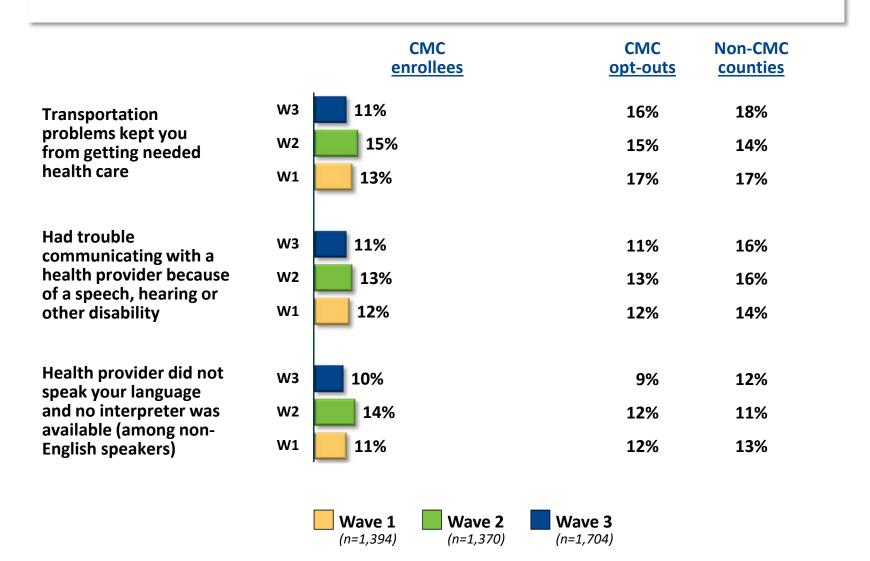


Table 5a

Beneficiaries who report having a single care manager* (such as a nurse or other helper from their health plan) and its perceived impact on the quality of their care

Overall Findings

	CMC enrollees	CMC opt-outs	Non-CMC counties
Has a single care manager	<u>36%</u>	<u>35%</u>	<u>38%</u>
Has improved care			
A lot	24	23	26
A little	6	7	7
Not at all	3	2	3
Not reported	3	3	2
	(n=1,704)	(n=1,026)	(n=571)

^{*} Single care manager described as the person who serves as your main point of contact and arranges all aspects of their care. Note: Asked in Wave 3 survey only.

Table 5b

Beneficiaries who report <u>not</u> having a <u>single care manager</u> and perceptions of the impact that having one would have on the quality of their care

	CMC enrollees	CMC opt-outs	Non-CMC counties
Does <u>not</u> have a single care manager	<u>54%</u>	<u>57%</u>	<u>56%</u>
Would improve care			
A lot	21	19	25
A little	11	12	10
Not at all	12	17	12
Not reported	10	9	9
	(n=1,704)	(n=1,026)	(n=571)

Table 6a

Beneficiaries who report having a <u>personal care plan</u>* and its perceived impact on the quality of their care

	CMC <u>enrollees</u>	CMC opt-outs	Non-CMC counties
Has a personal care plan	<u>33%</u>	<u>38%</u>	<u>40%</u>
Has improved care			
A lot	22	26	26
A little	7	7	8
Not at all	3	3	3
Not reported	1	2	3
	(n=1,704)	(n=1,026)	(n=571)

^{*} Personal care plan described as a plan designed to take into account your health goals, needs and preferences. Note: Asked in Wave 3 survey only.

Table 6b

Beneficiaries who report <u>not</u> having a <u>personal care plan</u> and perceptions of the impact that having one would have on the quality of their care

	CMC <u>enrollees</u>	CMC opt-outs	Non-CMC counties
Does <u>not</u> have a personal care plan	<u>50%</u>	<u>47%</u>	<u>45%</u>
Would improve care			
A lot	22	15	22
A little	13	12	11
Not at all	9	13	6
Not reported	6	7	6
	(n=1,704)	(n=1,026)	(n=571)

Table 7

Reasons CMC opt-outs give for choosing not to participate in Cal MediConnect

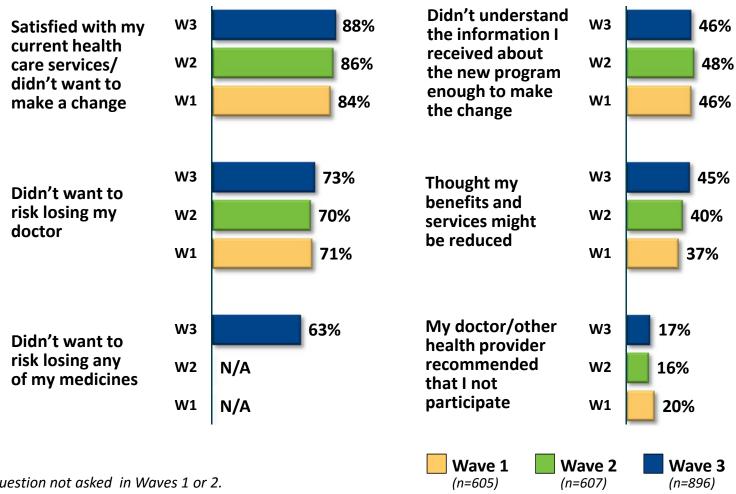
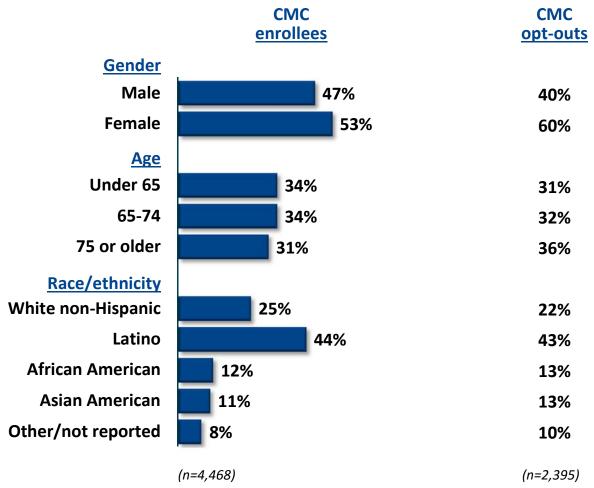
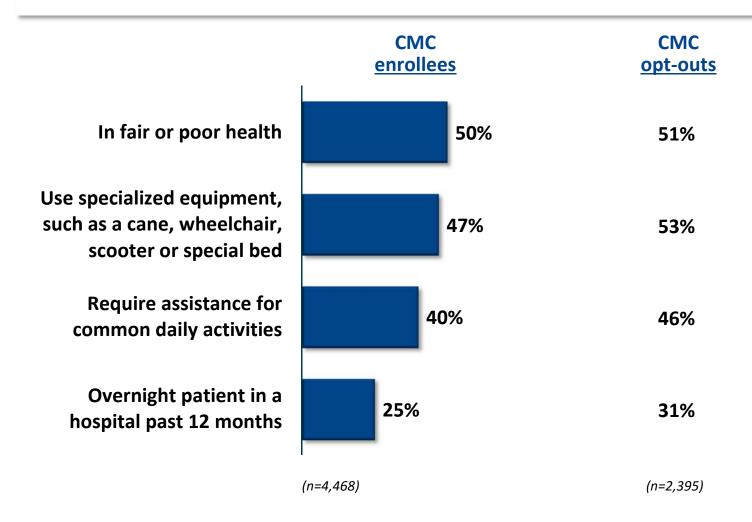


Table 8

Comparing the demographic characteristics of enrollees and opt-outs in CMC counties



Comparing the health characteristics of enrollees and opt-outs in CMC counties



Los Angeles County: Aggregated Results from Waves 1-3

Comparing CMC enrollees and opt-outs in Los Angeles County (1)

Los Angeles County

Large majorities of both CMC enrollees and opt-outs in Los Angeles County express confidence and satisfaction with the health services they are receiving. The only statistically significant differences are observed in the following areas:

- Somewhat smaller proportions of enrollees than opt-outs report being satisfied with their choice of doctors (80% among enrollees vs. 86% among opt-outs) or their choice of hospitals (77% vs. 84%). (Table LA-2a)
- A slightly larger proportion of enrollees (22%) than opt-outs (18%) reports that a doctor they had been seeing is not available through their plan. By contrast, slightly fewer enrollees than opt-outs report that transportation problems kept them from getting needed care (12% vs. 16%). (Table LA-4)

Comparing CMC enrollees and opt-outs in Los Angeles County (2)

Los Angeles County

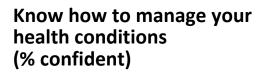
The personal characteristics of enrollees in Los Angeles County differ from optouts on a number of dimensions. These include:

- A slightly larger proportion of enrollees are Latino (49% vs. 44%). (Table LA-6)
- Proportionately more enrollees are male (47% vs. 40%). (Table LA-6)
- Slightly fewer enrollees are age 75 or older (34% vs. 38%). (Table LA-6)
- Enrollees are more likely to have been with their personal doctor for 1 year or less (26% vs. 14%), and are less likely to have been seeing them for 6 or more years (36% vs. 48%). (Table LA-3)
- Enrollees include smaller proportions of beneficiaries requiring the use of specialized equipment (47% vs. 53%), need assistance for common daily activities (39% vs. 47%) and have been an overnight patient in a hospital in the past year (25% vs. 32%). (Table LA-7)

Los Angeles County

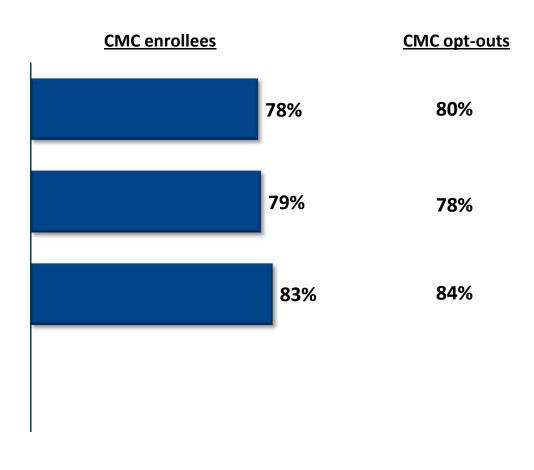
Table LA-1

Confidence that beneficiaries know how to manage their health conditions, can get questions about their health needs answered, and know who to call



Can get questions about your health needs answered (% confident)

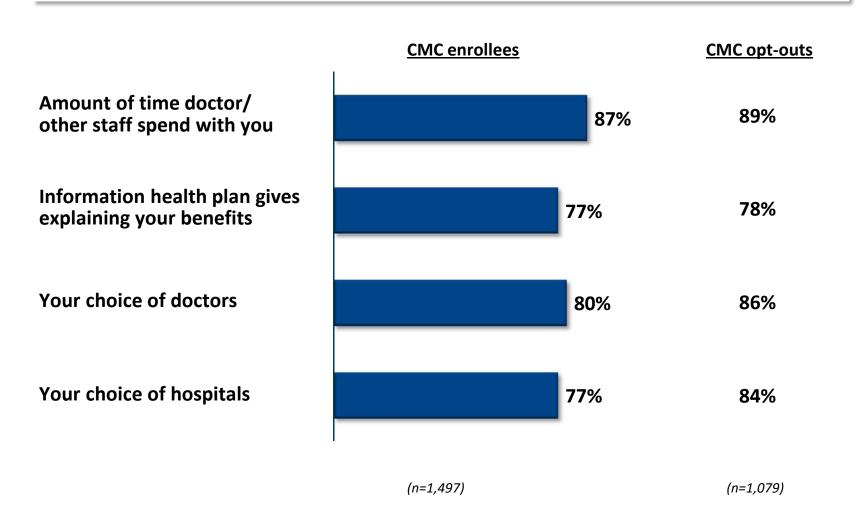
Know who to call if you have a health need or question (% yes)



Los Angeles County

Table LA-2a

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (% satisfied)



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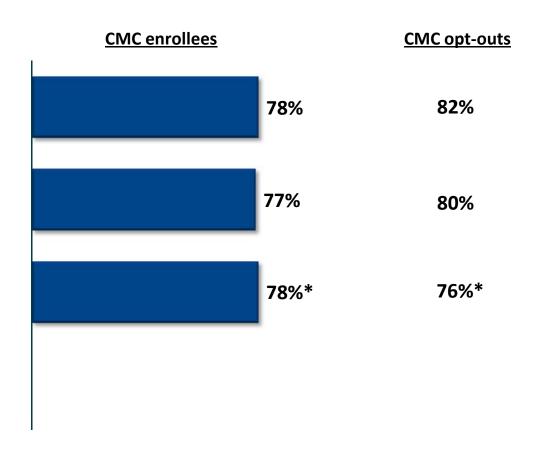
Table LA-2b

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (cont.) (% satisfied)



How long you have to wait to see a doctor when you need an appointment

Your ability to call a health provider regardless of the time of day



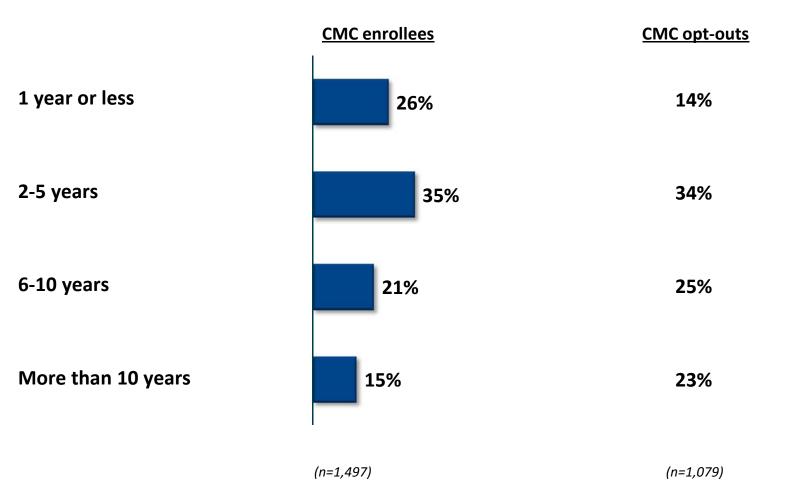
(n=1,497)

(n=1,079)

Los Angeles County

Table LA-3

Length of time beneficiaries have been going to the doctor they consider their personal doctor



Los Angeles County

Table LA-4

Specific problems encountered with health services in the past year

A doctor you were seeing is not available through your plan

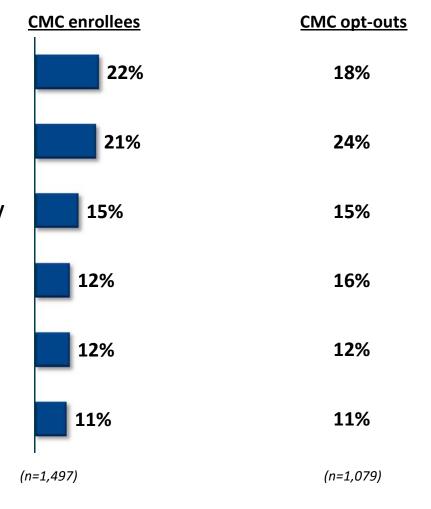
Had a misunderstanding about your health care services or coverage

Was denied a treatment or referral for another service recommended by a doctor

Transportation problems kept you from getting needed health care

Had trouble communicating with a health provider because of a speech, hearing or other disability

Health provider did not speak your language and no interpreter was available (among non- English speakers)



Reasons CMC opt-outs give for choosing not to participate in Cal MediConnect

Satisfied with my current health care services/didn't want to make a change

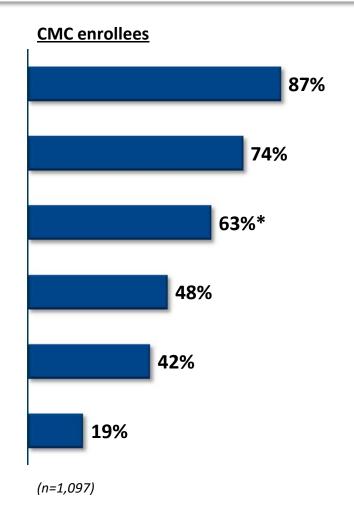
Didn't want to risk losing my doctor

Didn't want to risk losing any of my medicines

Didn't understand the information I received about the new program enough to make the change

Thought my benefits and services might be reduced

My doctor/other health provider recommended that I not participate



^{*} Asked only in Wave 3 survey

Los Angeles County

Table LA-6

Comparing the demographic characteristics of CMC enrollees and CMC opt-outs

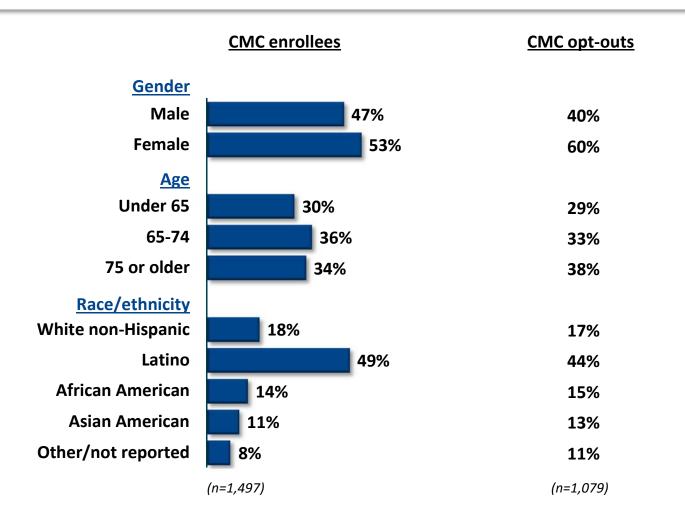
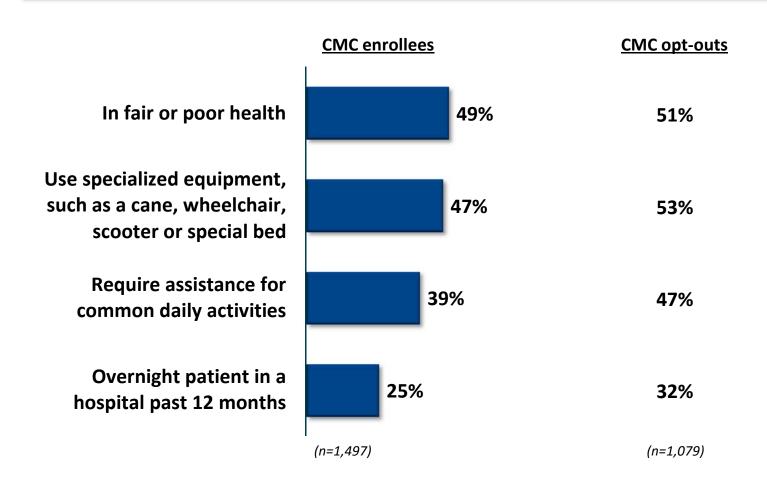


Table LA-7

Comparing the health characteristics of CMC enrollees and CMC opt-outs

Los Angeles County



Riverside County: Aggregated Results from Waves 1-3

Comparing CMC enrollees and opt-outs in Riverside County (1)

Riverside County

Large majorities of both enrollees and opt-outs in Riverside County express confidence and satisfaction with the health services they are receiving. The only statistically significant differences are observed are in the following areas:

- Slightly fewer enrollees (84%) than opt-outs (89%) report being satisfied with the amount of time their doctor or other staff people spend with them. (Table RIV-2a)
- Fewer report being satisfied with their choice of hospitals (77% vs. 84%). (Table RIV-2a)

Comparing CMC enrollees and opt-outs in Riverside County (2)

Riverside County

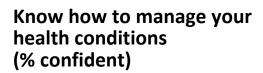
The personal characteristics of enrollees in Riverside County differ from optouts on several dimensions. These include:

- A slightly larger proportion are white non-Hispanic (34% vs. 28%), and fewer are Latino (44% vs. 52%). (Table RIV-6)
- Proportionately more enrollees are male (46% vs. 40%). (Table RIV-6)
- Slightly fewer enrollees are age 75 or older (25% vs. 31%). (Table RIV-6)
- Enrollees are more likely to have been with their personal doctor for 1 year or less (31% vs. 21%), and are less likely to have been seeing them for more than ten years (11% vs. 18%). (Table RIV-3)

Riverside County

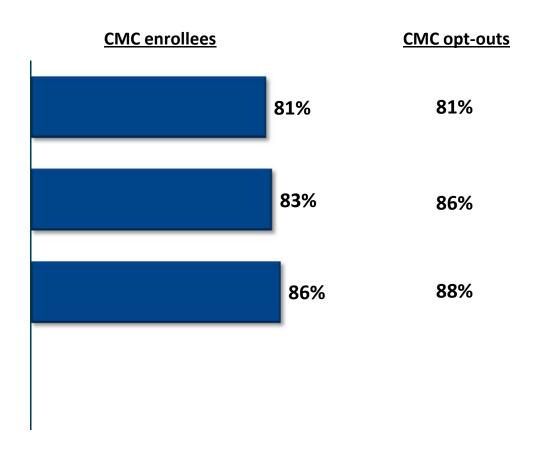
Table RIV-1

Confidence that beneficiaries know how to manage their health conditions, can get questions about their health needs answered, and know who to call



Can get questions about your health needs answered (% confident)

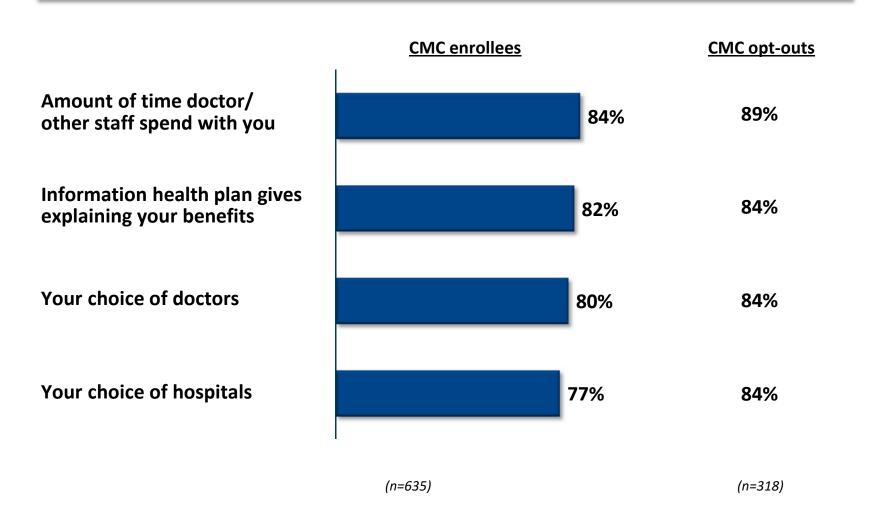
Know who to call if you have a health need or question (% yes)



Riverside County

Table RIV-2a

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (% satisfied)

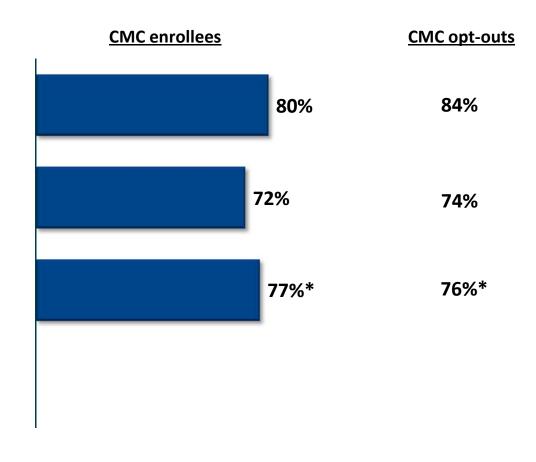


Overall satisfaction with different aspects of the health care services beneficiaries are receiving (cont.) (% satisfied)

The way different providers work together

How long you have to wait to see a doctor when you need an appointment

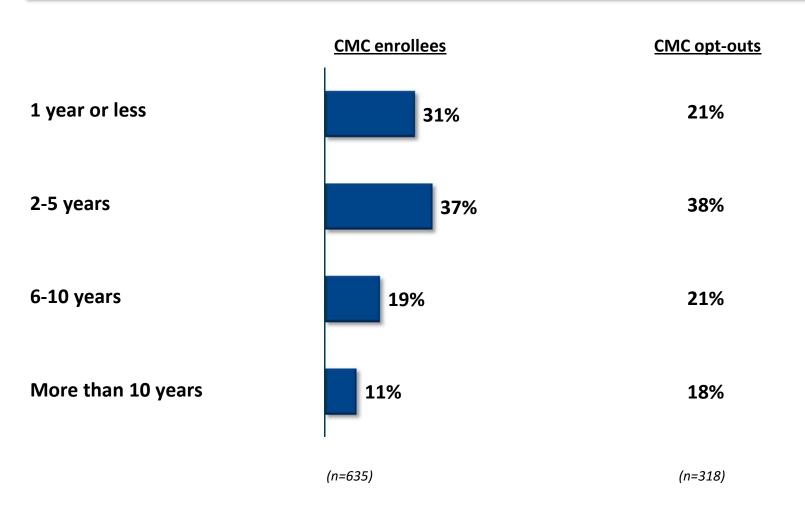
Your ability to call a health provider regardless of the time of day



(n=635)

(n=318)

Length of time beneficiaries have been going to the doctor they consider their personal doctor



Specific problems encountered with health services in the past year

Riverside County

A doctor you were seeing is not available through your plan

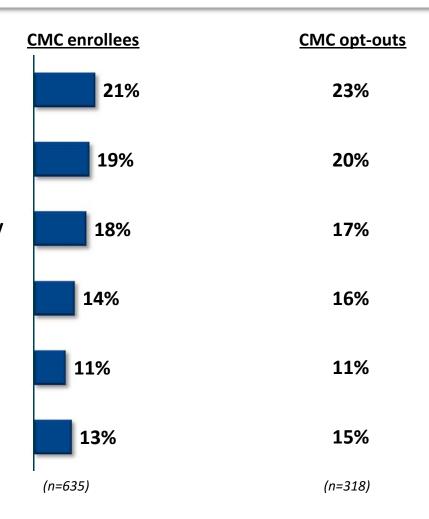
Had a misunderstanding about your health care services or coverage

Was denied a treatment or referral for another service recommended by a doctor

Transportation problems kept you from getting needed health care

Had trouble communicating with a health provider because of a speech, hearing or other disability

Health provider did not speak your language and no interpreter was available (among non- English speakers)



Reasons CMC opt-outs give for choosing not to participate in Cal MediConnect

Satisfied with my current health care services/didn't want to make a change

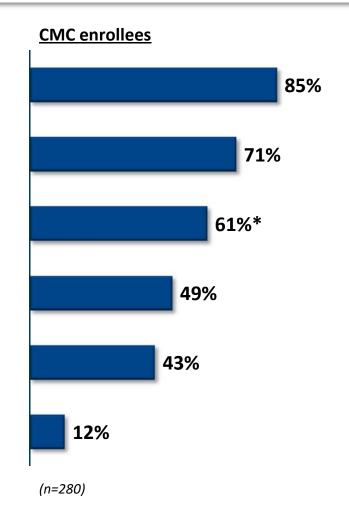
Didn't want to risk losing my doctor

Didn't want to risk losing any of my medicines

Didn't understand the information I received about the new program enough to make the change

Thought my benefits and services might be reduced

My doctor/other health provider recommended that I not participate



* Asked only in Wave 3 survey

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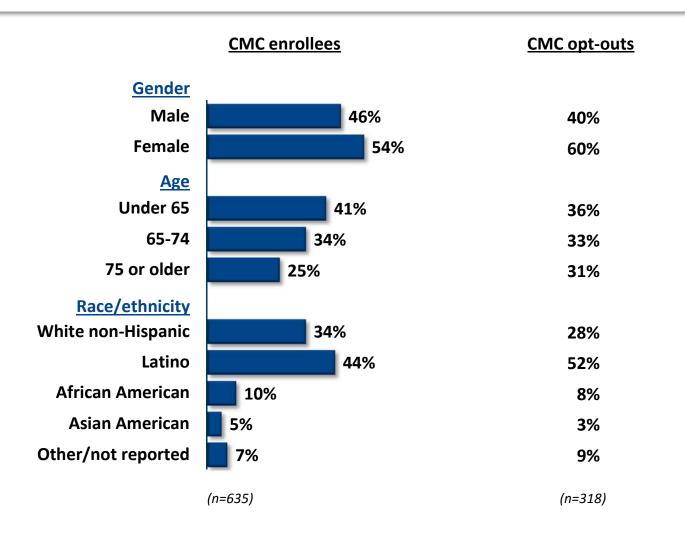
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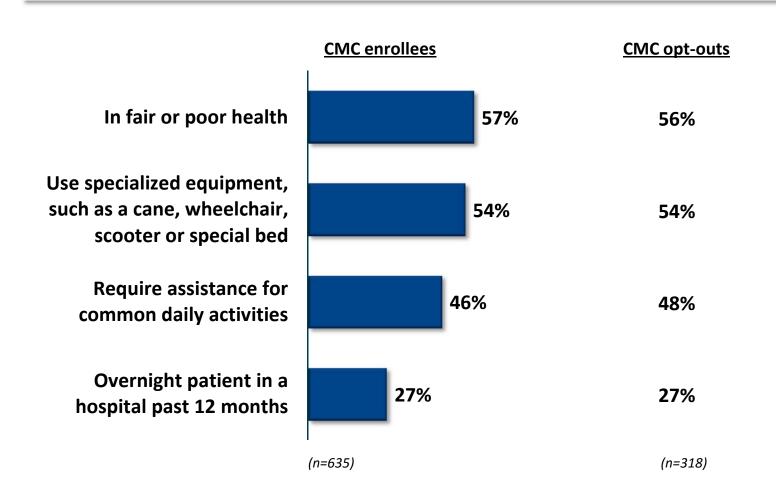
Comparing the demographic characteristics of CMC enrollees and CMC opt-outs

Riverside County



Comparing the health characteristics of CMC enrollees and CMC opt-outs

Riverside County



San Bernardino County: Aggregated Results from Waves 1-3

Comparing CMC enrollees and opt-outs in San Bernardino County (1)

San Bernardino County

Large majorities of both CMC enrollees and opt-outs in San Bernardino County express confidence and satisfaction with the health services they are receiving. The areas where statistically significant differences are observed include the following:

- Slightly fewer enrollees (83%) than opt-outs (89%) report being satisfied with the amount of time their doctor or other staff people spend with them. (Table SB-2a)
- Fewer report being satisfied with their choice of hospitals (80% vs. 86%). (Table SB-2a)
- A somewhat smaller proportion of enrollees say they are satisfied with how long they have to wait to see a doctor when they need an appointment (69% vs. 75%). (Table SB-2b)

Comparing CMC enrollees and opt-outs in San Bernardino County (2)

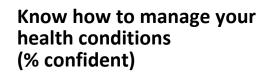
San Bernardino County

There are relatively few statistically significant differences in personal characteristics of enrollees and opt-outs in San Bernardino County. The lone exception relates to the length of time enrollees having been seeing their personal doctor.

■ A slightly larger proportion of enrollees than opt-outs have been with their personal doctor for 1 year or less (24% vs. 19%) and fewer have been with their personal doctor for more than 10 years (12% vs. 19%). (Table SB-3)

Table SB-1

Confidence that beneficiaries know how to manage their health conditions, can get questions about their health needs answered, and know who to call



Can get questions about your health needs answered (% confident)

Know who to call if you have a health need or question (% yes)

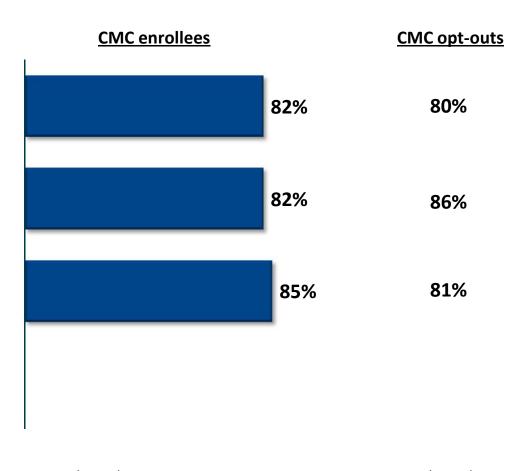


Table SB-2a

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (% satisfied)

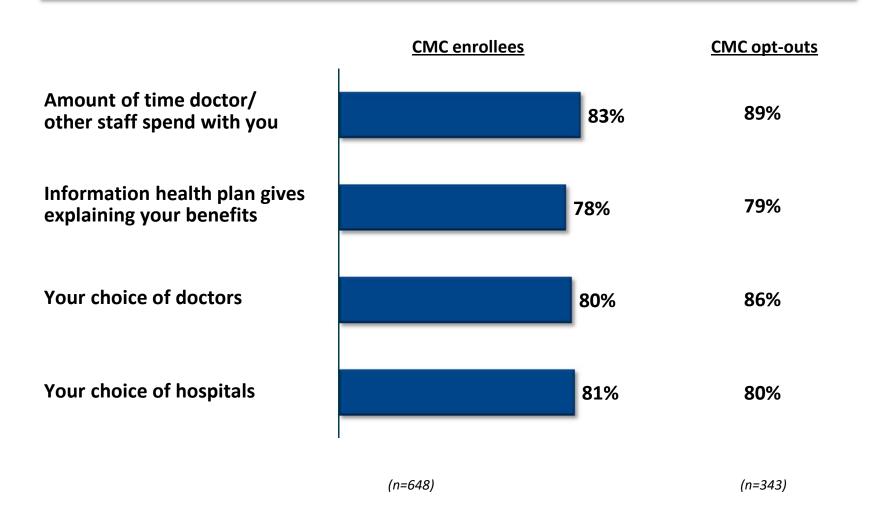


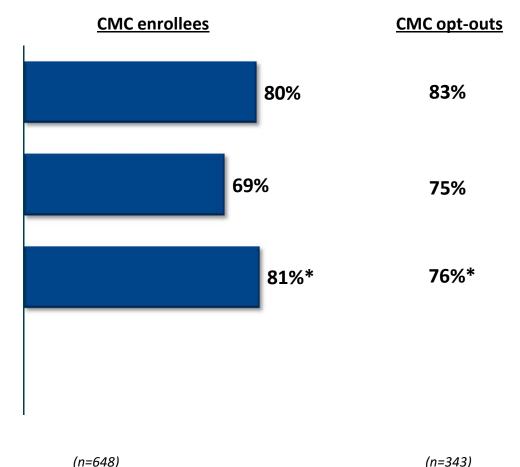
Table SB-2b

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (cont.) (% satisfied)



How long you have to wait to see a doctor when you need an appointment

Your ability to call a health provider regardless of the time of day



(n=648)

Table SB-3

Length of time beneficiaries have been going to the doctor they consider their personal doctor

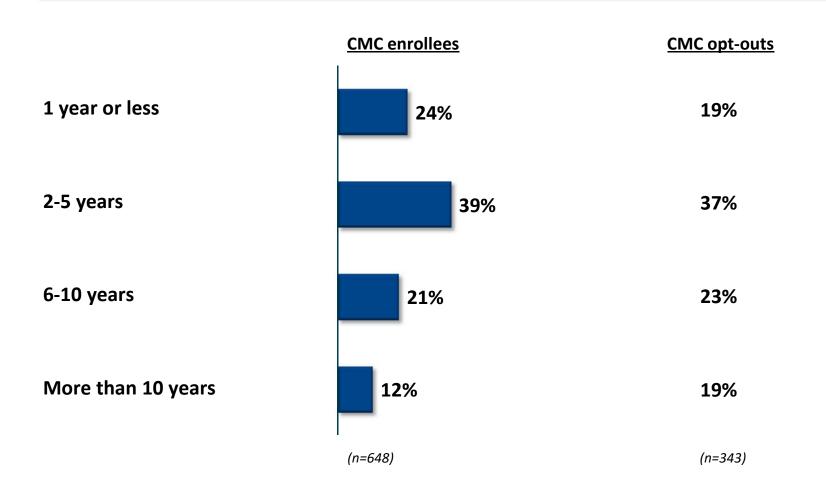


Table SB-4

Specific problems encountered with health services in the past year

A doctor you were seeing is not available through your plan

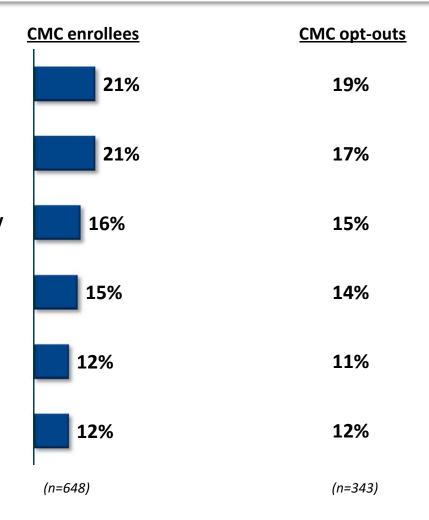
Had a misunderstanding about your health care services or coverage

Was denied a treatment or referral for another service recommended by a doctor

Transportation problems kept you from getting needed health care

Had trouble communicating with a health provider because of a speech, hearing or other disability

Health provider did not speak your language and no interpreter was available (among non- English speakers)



Reasons CMC opt-outs give for choosing not to participate in Cal MediConnect

Satisfied with my current health care services/didn't want to make a change

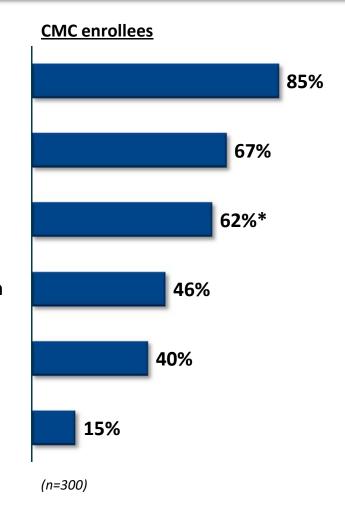
Didn't want to risk losing my doctor

Didn't want to risk losing any of my medicines

Didn't understand the information I received about the new program enough to make the change

Thought my benefits and services might be reduced

My doctor/other health provider recommended that I not participate



^{*} Asked only in Wave 3 survey

Table SB-6

Comparing the demographic characteristics of CMC enrollees and CMC opt-outs

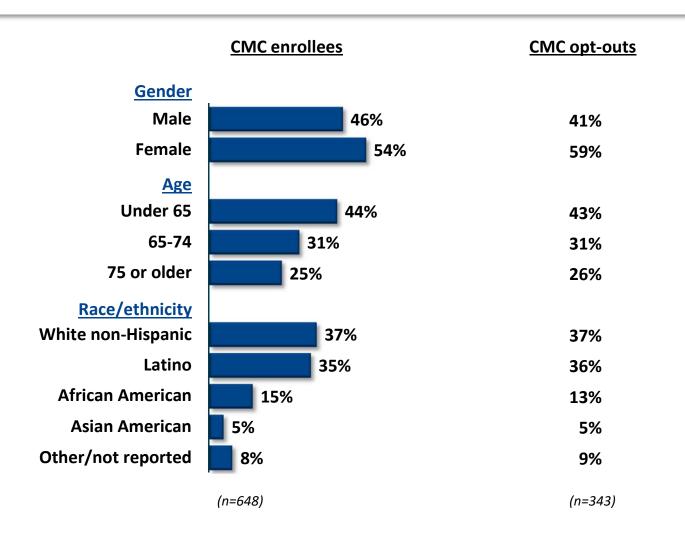
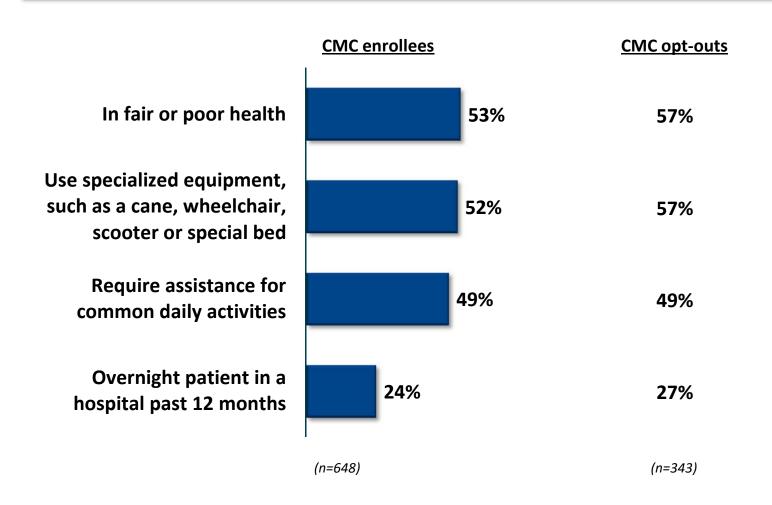


Table SB-7

Comparing the health characteristics of CMC enrollees and CMC opt-outs



San Diego County: Aggregated Results from Waves 1-3

Comparing CMC enrollees and opt-outs in San Diego County (1)

San Diego County

Large majorities of both CMC enrollees and opt-outs in San Diego County express confidence and satisfaction with the health services they are receiving. However, in a number of areas the evaluations given by enrollees are not quite as positive as those given by opt-outs. For example:

- A smaller proportion of enrollees (79%) than opt-outs (86%) reports being confident that they can get questions about their health needs answered. (Table SD-1)
- Fewer enrollees report being satisfied with the amount of time their doctor and other staff spend with them (84% vs. 90%), their choice of doctors (78% vs. 86%) or their choice of hospitals (81% vs. 88%), and the amount of time they have to wait to see a doctor when they need an appointment (74% vs. 83%). (Tables SD-2a and 2b)

On the other hand, a slightly smaller proportion of enrollees (18%) than optouts (24%) reports having had a misunderstanding about their health care services or coverages in the past year. (Table SD-4)

Comparing CMC enrollees and opt-outs in San Diego County (2)

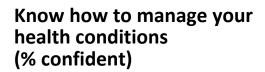
San Diego County

Enrollees in San Diego County differ from opt-outs in the following areas:

- Enrollees are more likely to have been with their personal doctor for 1 year or less (28% vs. 22%), and are less likely to have been seeing them for more than 10 years (10% vs. 15%). (Table SD-3)
- Enrollees include smaller proportions of beneficiaries who require the use of specialized equipment (43% vs. 52%), need assistance for common daily activities (36% vs. 47%) and have been an overnight patient in a hospital in the past year (25% vs. 31%). (Table SD-7)

Table SD-1

Confidence that beneficiaries know how to manage their health conditions, can get questions about their health needs answered, and know who to call



Can get questions about your health needs answered (% confident)

Know who to call if you have a health need or question (% yes)

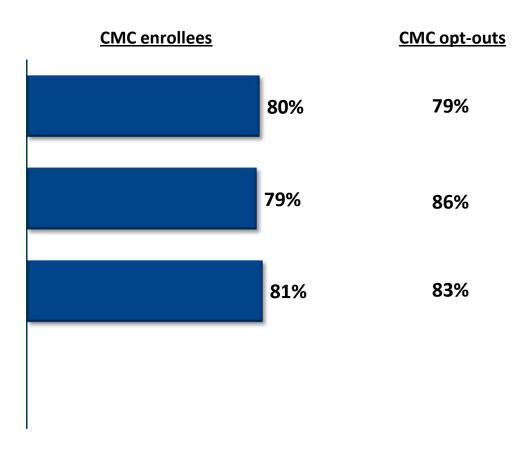


Table SD-2a

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (% satisfied)

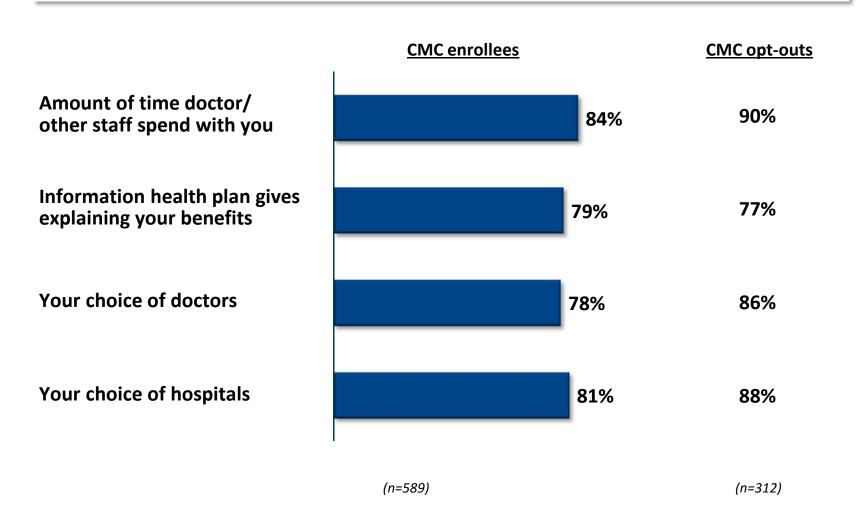


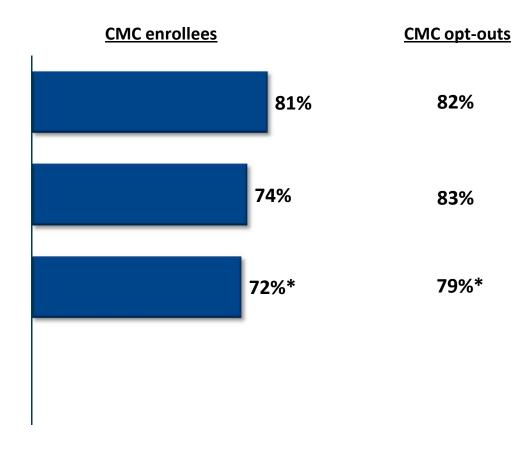
Table SD-2b

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (cont.) (% satisfied)



How long you have to wait to see a doctor when you need an appointment

Your ability to call a health provider regardless of the time of day

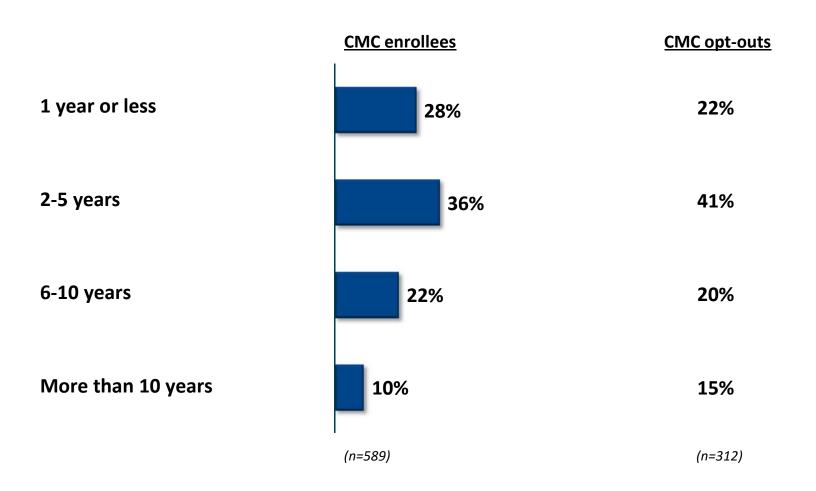


(n=589)

(n=312)

Table SD-3

Length of time beneficiaries have been going to the doctor they consider their personal doctor



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Table SD-4

Specific problems encountered with health services in the past year

San Diego County

A doctor you were seeing is not available through your plan

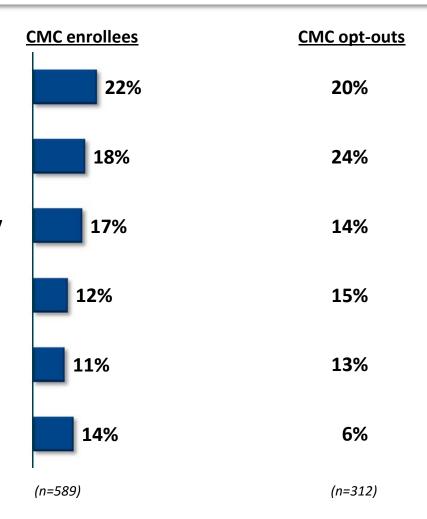
Had a misunderstanding about your health care services or coverage

Was denied a treatment or referral for another service recommended by a doctor

Transportation problems kept you from getting needed health care

Had trouble communicating with a health provider because of a speech, hearing or other disability

Health provider did not speak your language and no interpreter was available (among non-English speakers)



Reasons CMC opt-outs give for choosing not to participate in Cal MediConnect

Satisfied with my current health care services/didn't want to make a change

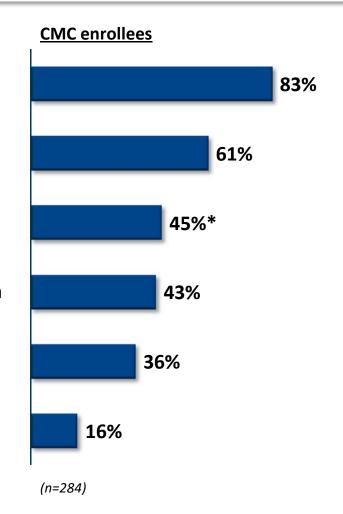
Didn't want to risk losing my doctor

Didn't want to risk losing any of my medicines

Didn't understand the information I received about the new program enough to make the change

Thought my benefits and services might be reduced

My doctor/other health provider recommended that I not participate

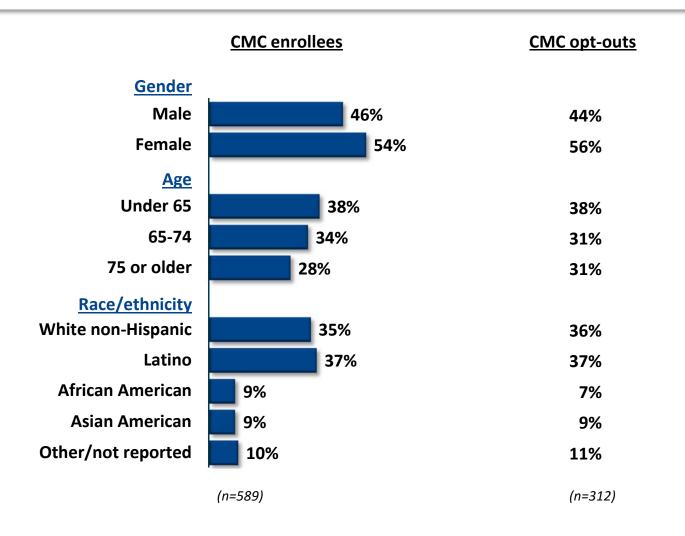


^{*} Asked only in Wave 3 survey

Table SD-6

Comparing the demographic characteristics of CMC enrollees and CMC opt-outs

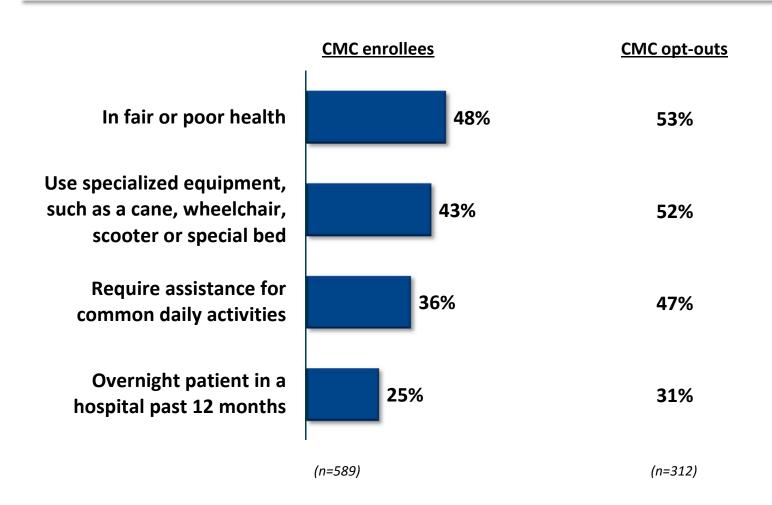
San Diego County



San Diego County

Table SD-7

Comparing the health characteristics of CMC enrollees and CMC opt-outs



Santa Clara County: Aggregated Results from Waves 1-3

Comparing CMC enrollees and opt-outs in Santa Clara County (1)

Santa Clara County

Large majorities of both CMC enrollees and opt-outs in Santa Clara County express confidence and satisfaction with the health services they are receiving. Three areas where statistically significant differences are observed include the following:

- A smaller proportion of enrollees (77%) than opt-outs (87%) reports being confident that they can get questions about their health needs answered. (Table SC-1)
- Fewer enrollees report being satisfied with the information that their health plans gives them explaining their benefits (72% vs. 80%). (Table SC-2a)
- A slightly smaller proportion of enrollees (80%) than opt-outs (86%) reports being satisfied with their choice of hospitals. (Table SC-2a)

On the other hand, significantly fewer enrollees than opt-outs report having been denied a treatment or referral for another service recommended by a doctor (18% vs. 26%) or report that transportation problems kept them for getting need care (16% vs. 23%). (Table SC-4)

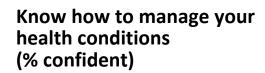
Comparing CMC enrollees and opt-outs in Santa Clara County (2)

Santa Clara County

The only statistically significant difference in the personal characteristics of enrollees and opt-outs in Santa Clara County is that fewer CMC enrollees (41%) report being in fair or poor health compared to those who chose to opt out of Cal MediConnect (57%). (Table SC-7)

Table SC-1

Confidence that beneficiaries know how to manage their health conditions, can get questions about their health needs answered, and know who to call



Can get questions about your health needs answered (% confident)

Know who to call if you have a health need or question (% yes)

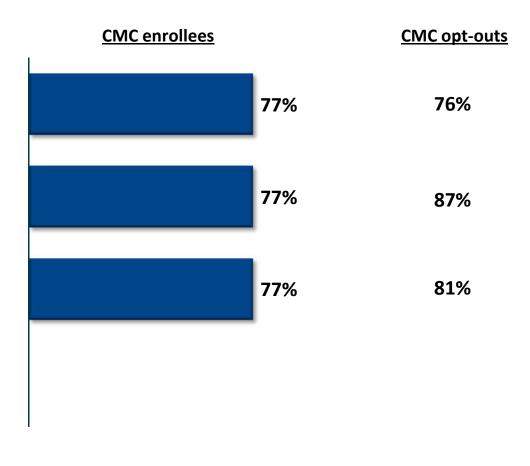


Table SC-2a

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (% satisfied)

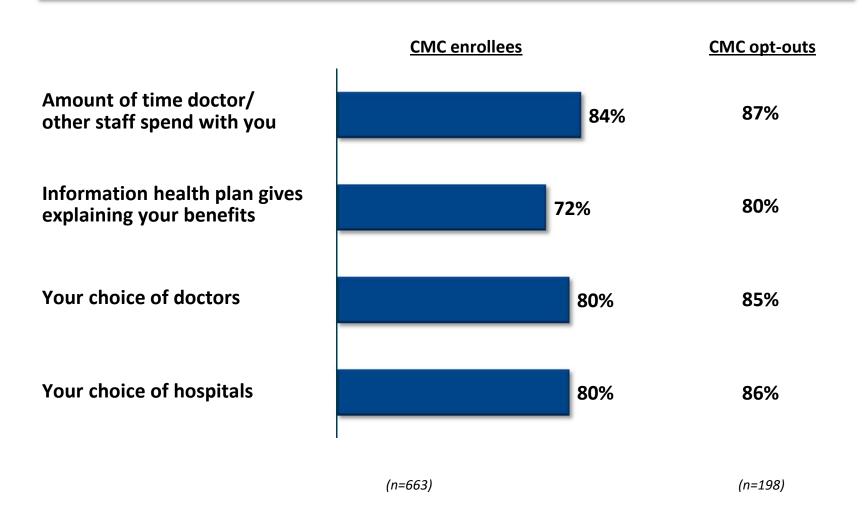


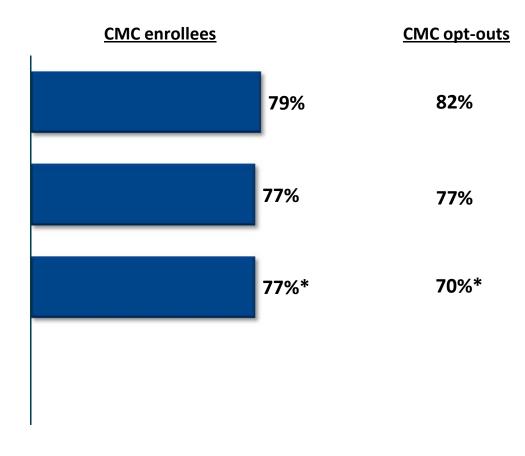
Table SC-2b

Overall satisfaction with different aspects of the health care services beneficiaries are receiving (cont.) (% satisfied)



How long you have to wait to see a doctor when you need an appointment

Your ability to call a health provider regardless of the time of day

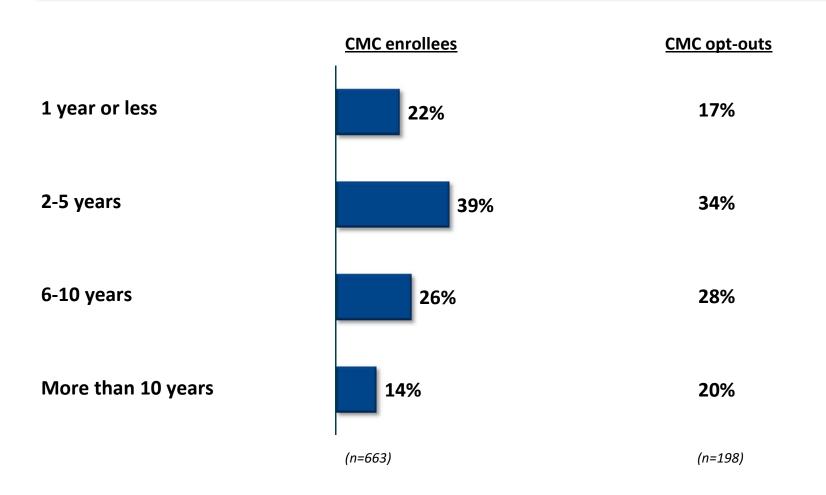


(n=663)

(n=198)

Table SC-3

Length of time beneficiaries have been going to the doctor they consider their personal doctor



Specific problems encountered with health services in the past year

A doctor you were seeing is not available through your plan

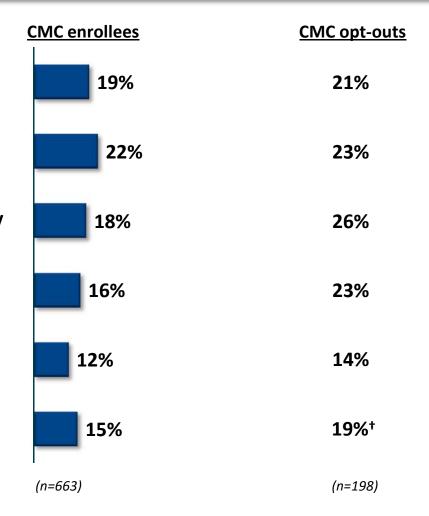
Had a misunderstanding about your health care services or coverage

Was denied a treatment or referral for another service recommended by a doctor

Transportation problems kept you from getting needed health care

Had trouble communicating with a health provider because of a speech, hearing or other disability

Health provider did not speak your language and no interpreter was available (among non- English speakers)



Reasons CMC opt-outs give for choosing not to participate in Cal MediConnect

Satisfied with my current health care services/didn't want to make a change

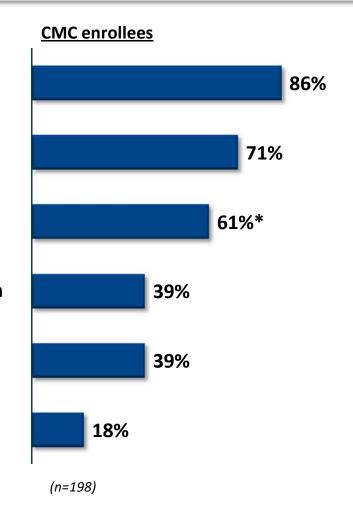
Didn't want to risk losing my doctor

Didn't want to risk losing any of my medicines

Didn't understand the information I received about the new program enough to make the change

Thought my benefits and services might be reduced

My doctor/other health provider recommended that I not participate



* Asked only in Wave 3 survey

Los Angeles

Riversid

San Bernardir

San

Table SC-6

Comparing the demographic characteristics of CMC enrollees and CMC opt-outs

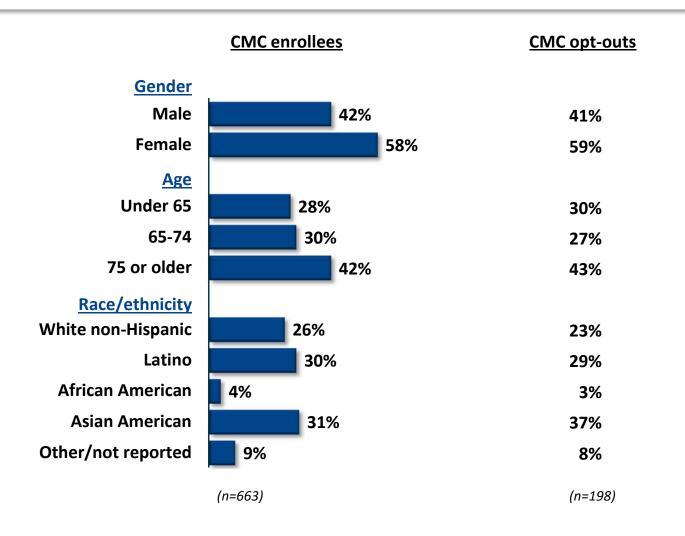
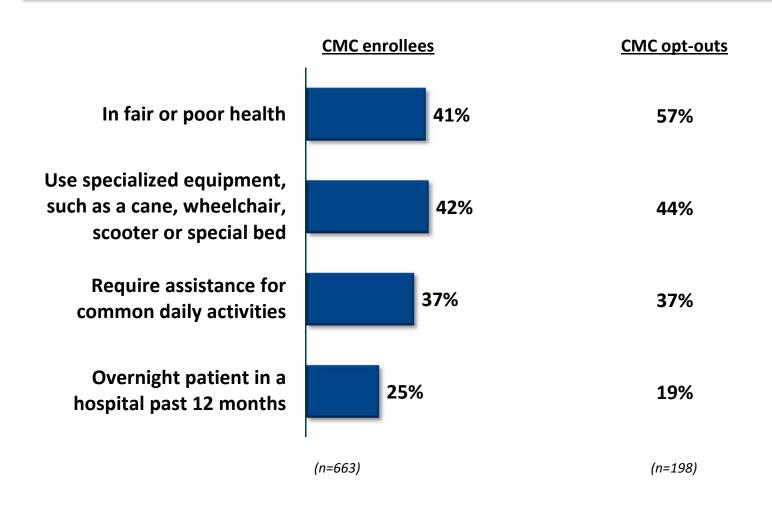


Table SC-7

Comparing the health characteristics of CMC enrollees and CMC opt-outs



San Mateo County Results

NOTE: The Wave 3 survey was the first year in which beneficiaries in San Mateo County were surveyed. Because of this, while the number of interviews completed among CMC enrollees in the county (n=276) was considered large enough to report reliable findings, the number of interviews for opt-outs was not (n=73), and are therefore not reported here.

CMC enrollee confidence and satisfaction with their health services in San Mateo County (1)

San Mateo County

Similar to enrollees in other counties, large majorities of San Mateo County CMC enrollees express confidence and satisfaction with the health services they are receiving.

Greater than eight in ten enrollees say they:

- Are confident that they know how to manage their health conditions (83%),
- Are confident that they can get their questions answered about their health needs (84%), and
- Know who to call if they have a health need or question (86%).

CMC enrollee confidence and satisfaction with their health services in San Mateo County (2)

San Mateo County

Eight in ten or more report being satisfied with the health care services in each of the following areas:

- The amount of time their doctor/other staff spend with them (88%).
- Their choice of hospitals (84%).
- The information their health plan gives them explaining their benefits (83%).
- The way different providers work together (81%).
- How long they have to wait to see a doctor when they need an appointment (81%).
- Their choice of doctors (80%).

In only one area, their ability to call a health provider regardless of the time of day, do fewer than three in four (73%) report being satisfied, although half of those who don't (13%) are unable to offer an assessment about this.

Specific problems encountered by CMC enrollees in San Mateo County

San Mateo County

No single issue is cited by more than one in five CMC enrollees in San Mateo County as a problem they encountered since changing over to Cal MediConnect.

 The most commonly reported problem, cited by 18%, is having a misunderstanding about their health care services or coverages.

Demographic characteristics of CMC enrollees in San Mateo County

San Mateo County

CMC enrollees in San Mateo County are racially and ethnically quite diverse, with 33% being white non-Hispanic, 29% Latino, 26% Asian American and 9% African American.

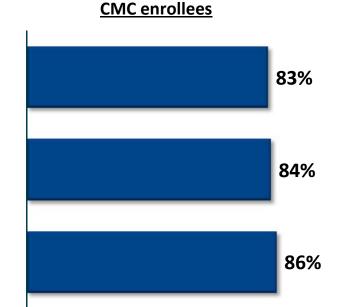
They also tend to be older and are include more females than men, with greater than four in ten age 75 or older (42%) and 62% female.

Confidence that CMC enrollees know how to manage their health conditions, can get questions about their health needs answered, and know who to call



Can get questions about your health needs answered (% confident)

Know who to call if you have a health need or question (% yes)

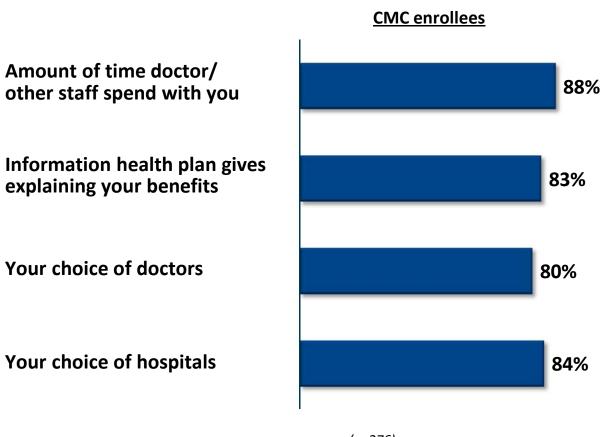


(n=276)

San Mateo County

Table SM-2a

Overall satisfaction of CMC enrollees with the health care services beneficiaries are receiving (% satisfied)



(n=276)

Table SM-2b

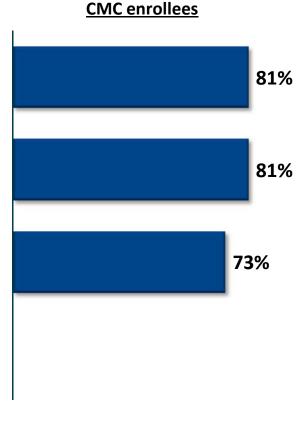
Overall satisfaction of CMC enrollees with the health care services beneficiaries are receiving (cont.) (% satisfied)

San Mateo County



How long you have to wait to see a doctor when you need an appointment

Your ability to call a health provider regardless of the time of day

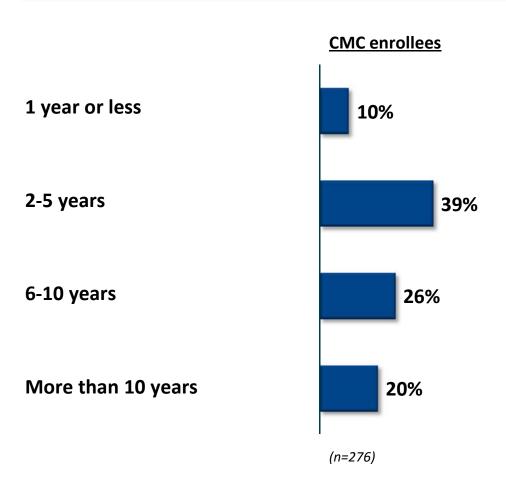


(n=276)

San Mateo County

Table SM-3

Length of time CMC enrollees have been going to the doctor they consider their personal doctor

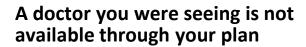


Note: Wave 3 opt-outs findings not reported due to small sample sizes.

Differences between 100% and the sum of the percentages for each group equal proportion who could not give an estimate.

Table SM-4

Specific problems encountered by CMC enrollees with their health services since changing over to Cal MediConnect



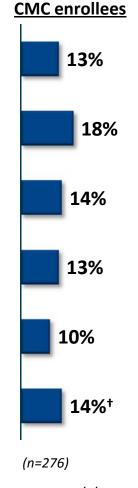
Had a misunderstanding about your health care services or coverage

Was denied a treatment or referral for another service recommended by a doctor

Transportation problems kept you from getting needed health care

Had trouble communicating with a health provider because of a speech, hearing or other disability

Health provider did not speak your language and no interpreter was available (among non- English speakers)



San Mateo County

Table SM-5

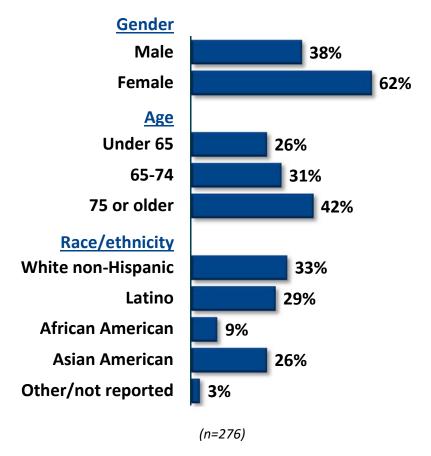
Reasons CMC opt-outs give for choosing not to participate in Cal MediConnect

Note: Wave 3 opt-out findings for San Mateo County were not reported due to small sample sizes.

Table SM-6

Demographic characteristics of CMC enrollees in San Mateo County

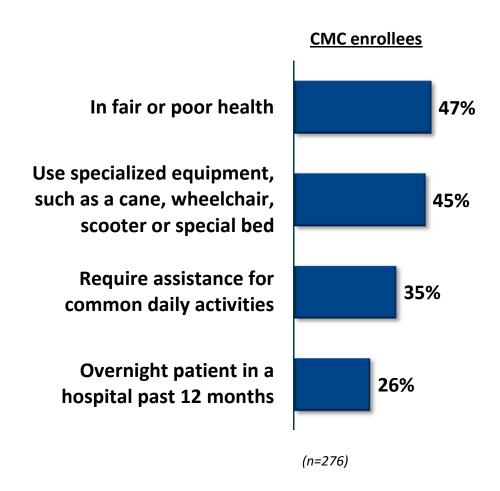
CMC enrollees



Note: Wave 3 opt-outs findings not reported due to small sample sizes.

Table SM-7

Health characteristics of CMC enrollees in San Mateo County



Orange County Results

NOTE: The Wave 3 survey was the first year in which beneficiaries in Orange County were surveyed. Because of this, while the number of interviews completed among CMC enrollees in the county (n=160) was considered large enough to report reliable findings, the number of interviews for opt-outs was not (n=71), and are therefore not reported here.

CMC enrollee confidence and satisfaction with their health services in Orange County (1)

Slightly less than eight in ten CMC enrollees in Orange County express confidence that they know how to manage their health conditions (78%) or say they are confident that they can get questions about their health needs answered (79%), while 82% say they know who to call if they have a health need or question.

Greater than eight in ten CMC enrollees in Orange County report being satisfied with their health care services in four specific areas:

- The amount of time their doctor or other staff spend with them (89%).
- The information their health plan gives them explaining their benefits (87%).
- Their choice of doctors (84%).
- The way different providers work together (84%).

CMC enrollee confidence and satisfaction with their health services in Orange County (2)

Slightly fewer than eight in ten express satisfaction with their health provider in three other areas:

- How long they have to wait to see a doctor when they need an appointment (79%).
- Their choice of hospitals (74%).
- Their ability to call a health provider regardless of the time of day (72%), although most of the others (19%) are unable to offer an assessment about this.

Specific problems encountered by CMC enrollees in Orange County

No single issue is cited by more than one in five CMC enrollees in San Mateo County as a problem they encountered since changing over to Cal MediConnect.

 The most commonly reported problems are that a doctor they were seeing is not available through their plan (19%) and they had a misunderstanding about their health care services or coverages (17%).

Demographic characteristics of CMC enrollees in Orange County

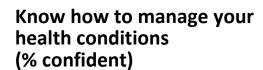
CMC enrollees in Orange County are racially and ethnically quite diverse, with 45% being Latino, 36% white non-Hispanic, and 14% Asian American.

They also tend to be older with nearly half (49%) age 75 or older. Also, 56% are female.

Table OR-1

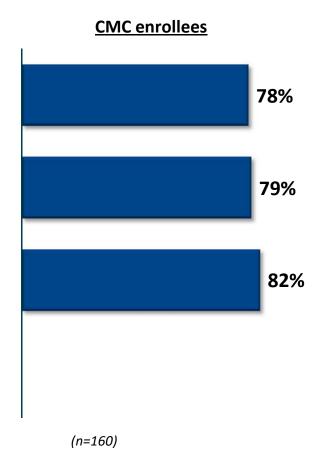
Confidence that CMC enrollees know how to manage their health conditions, can get questions about their health needs answered, and know who to call

Orange County



Can get questions about your health needs answered (% confident)

Know who to call if you have a health need or question (% yes)



Orange County

Table OR-2a

Overall satisfaction of CMC enrollees with the health care services beneficiaries are receiving (% satisfied)

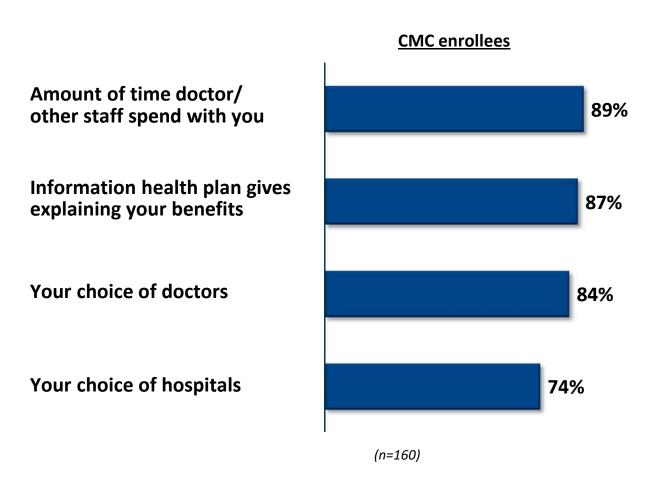


Table OR-2b

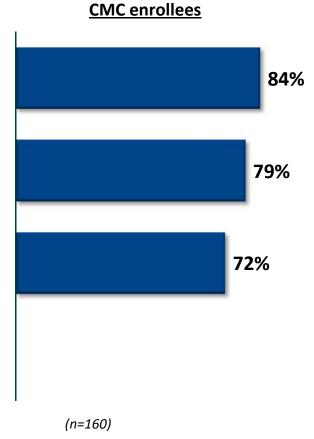
Overall satisfaction of CMC enrollees with the health care services beneficiaries are receiving (cont.) (% satisfied)

Orange County



How long you have to wait to see a doctor when you need an appointment

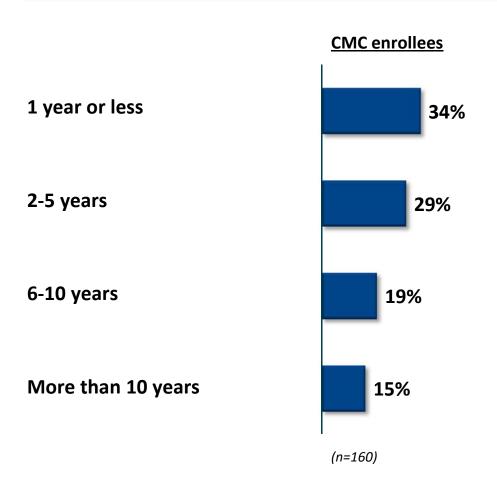
Your ability to call a health provider regardless of the time of day



Orange County

Table OR-3

Length of time CMC enrollees have been going to the doctor they consider their personal doctor



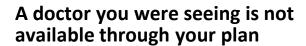
Note: Wave 3 opt-outs findings not reported due to small sample sizes.

Differences between 100% and the sum of the percentages equal proportion who could not give an estimate.

Orange County

Table OR-4

Specific problems encountered by CMC enrollees with their health services since changing over to Cal MediConnect



Had a misunderstanding about your health care services or coverage

Was denied a treatment or referral for another service recommended by a doctor

Transportation problems kept you from getting needed health care

Had trouble communicating with a health provider because of a speech, hearing or other disability

Health provider did not speak your language and no interpreter was available (among non- English speakers)

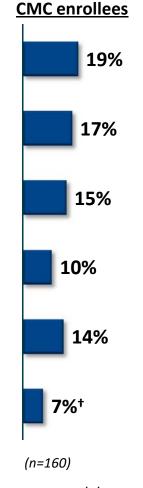


Table OR-5

Reasons CMC opt-outs give for choosing not to participate in Cal MediConnect

Orange County

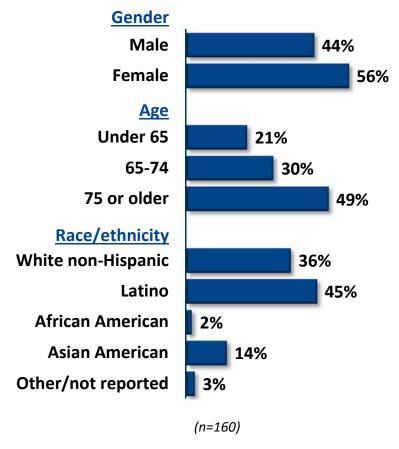
Note: Wave 3 opt-out findings for Orange County were not reported due to small sample sizes.

Orange County

Table OR-6

Demographic characteristics of CMC enrollees in Orange County

CMC enrollees

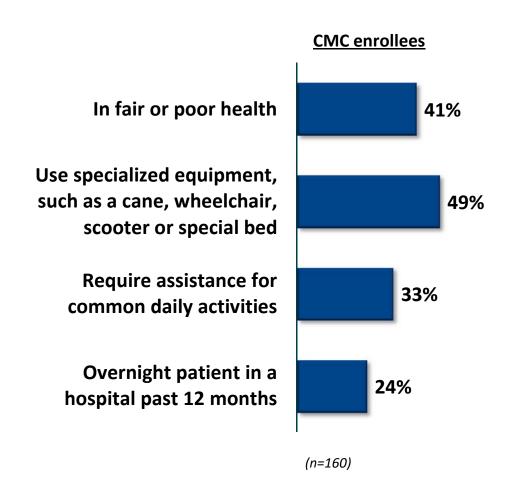


Note: Wave 3 opt-outs findings not reported due to small sample sizes.

Table OR-7

Health characteristics of CMC enrollees in Orange County

Orange County



Note: Wave 3 opt-outs findings not reported due to small sample sizes.